Field	Field Name	Begin	Size	Picture	Field Edits
No.	110100 1101110	Pos	3,20	7 10000 0	110.00 20.00
110.					
1	Record Type	1	2	9(02)	Required. Must be 21.
2	Reporting Organization	3	2	X(02)	Required. Edit with RO/Company table.
3	Location State	5	2	9(02)	Required. Edit with FIPS State table.
4	Company	7	3	9(03)	For Reinsured edit with company table.
5	Policy Number	10	7	9(07)	Required. Must be > zeros.
6	Crop Year	17	4	9(04)	Required. Must be the crop year of the
					crops reported under the policy. This will equal the Reinsurance Year +/- 1.
7	Crop Code	21	4	9(04)	Required; Edit with ADM2.
8	Insurance Plan Code	25	2	9(02)	Required; Edit with ADM2.
9	Location County	27	3	9(03)	Required; Edit with FIPS County Table.
10	Unit Number	30	5	9(05)	Required; Must be > zeros. Unit Number
					must end in '00' for Enterprise and Whole Farm Units (i.e. 00100).
11	Type Code	35	3	9(03)	Required; Edit with ADM2.
12	Practice Code	38	3	9(03)	Required; Edit with ADM2.
13	Coverage Flag	41	1	X(01)	Required; Must be:
					C = Catastrophic "Cat" Coverage
					A = Additional Coverage
					For CRC, GRIP and Revenue Assurance
					must be 'A'.
14	Claim Number	42	8	9(08)	Must match Loss Total Claim Number on the Type 20 record.
15	Type 21 Key Reserve	50	26	X(26)	Space Reserved for Additional key data
					required in the future or for other record
					types.
16	Record Number	76	3	9(03)	Must be > zero and unique within a Crop
					Policy (Location State/Location
1.7	T 11 D 13 I	70	2	0(02)	County/Crop).
17	Type 11 Record Number	79	3	9(03)	Required, the record number of the Type 11
					record that established the guarantee, liability
18	Adjuster SSN	82	9	9(09)	and premium for this Type 21 record. Required (except for GRP/GRIP); Must
10	Adjuster 551v	62	7	9(09)	match a certified loss adjuster (established by
					an accepted Type 56 record).
19	Rate Class	91	3	X(03)	Required for most insurance plans; See
	11440 01465	, 1	Ü	11(00)	Exhibit 11-2 for ADM validation rules.
					Otherwise; zero fill.
20	Stage Code	94	2	X(02)	Required for certain crops. See Exhibit 21-5
	C			. ,	for validation rules. Otherwise; zeros or
					spaces.
21	100% Replant Payment	96	1	X(01)	Validate as follows:
	Flag				Y = Policy holder entitled up to 100% of the
					Replant Cost.
					Spaces = Normal Replant reimbursement
22	Stage Guarantee per Acre	97	10	9(08)V9(02)	See Indemnity Calculations for validation
					rules. Zero Fill for Quota Tobacco and Fl.
					Fruit Trees (plan 40). Raisin Reconditioning

Field	Field Name	Begin	Size	Picture	Field Edits
No.		Pos	3,20	1 100011 0	
23	Determined Acres/Tons	107	8	9(06)V9(02)	Payment = dollars and cents per ton for reconditioning. Required for all crops except Florida Fruit Trees. For Raisins, enter the number of tons to the nearest hundredth. For Mint, if stage code is W1, acres must be at least the lesser of 20 acres or 20% of the acres in the unit.
24	Filler	115	4	X(04)	Must be spaces.
25	Loss Guarantee	119	10	9(08)V9(02)	Required; See Indemnity Calculations for edits. Zero fill for Raisin Reconditioning Payment.
26	Reserved	129	10	X(10)	Must be spaces.
27	Reserved	139	10	X(10)	Must be spaces.
28	Reserved	149	10	X(10)	Must be spaces.
29	Reserved	159	10	X(10)	Must be spaces.
30	Harvested Production	169	10	9(08)V9(02)	Must be Production to Count. Otherwise, zero fill.
31	Reserved	179	10	X(10)	Must be spaces.
32	Production to Count	189	10	9(08)V9(02)	Sum of Net Harvested and Net Appraised Production. Used to calculate Farm Unit Deficiency, may be zero. Adjusted for moisture and quality.
33	Production to Count Conversion for Revenue Crops (Bushels, Tons, etc)	199	10	9(08)V9(02)	Production to count in the basic unit of measure for RA (plan 25), IP (plan 42), IIP (plan 45), CRC (plan 44) and Quota Tobacco (plan 70) if field 32 (production to count) is greater than zero. Otherwise, zero fill.
34	Farm Unit Deficiency	209	10	S9(08)V9(02)	Required; If zero, Indemnity must be zero. Must be a signed field. Zero fill for Raisin Reconditioning Payment and IP.
35	Insured Share	219	4	9(01)V9(03)	Required; Must be > zero & 1.000.
36	GRP/GRIP Payment Calculation Factor	223	4	9(01)V9(03)	Required for GRP/GRIP plan crops only, all other Plans, zeros fill. For GRP/GRIP calculation see exhibit 21-9.
37	Indemnity	227	10	S9(10)	Required; See Exhibit 21-9 for calculation. The total of all Type 21 Indemnity fields for a given claim number must equal the sum of the Total fields for the corresponding Type 20 record(s). The sum of all Type 21 Indemnity fields for a Unit cannot exceed the sum of all Type 11 Liability fields for the same unit by more than the lesser of 0.1% or \$10. Total indemnity for the units cannot be negative. This must be a <i>signed field</i> .

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
No.		103			
38	Sugar Factor	237	3	V9(03)	Must be > zero for Sugar Beets if Harvested Production > zero. Otherwise; zero fill
39	Audit Correction	240	1	9(01)	Must be: 0 = Not Applicable 1 = Corrected
40	Primary Month	241	2	9(02)	If Indemnity > zero, entry must be 01-12, otherwise zero fill. If GRP/GRIP Crops, must be appropriate month for final payments.
41	Secondary Month	243	2	9(02)	If Primary Percent is < 1.00, entry must be 01-12. Otherwise, zero fill. For GRP/GRIP Crops, zero fill.
42	Primary Cause	245	2	9(02)	Must be a valid loss cause for the Ins plan, Crop, Type, and practices reported on the Type 11 (Acreage) records. See Exhibit 21-2.
43	Primary Percent	247	3	9(01)V9(02)	Must be zero if the Primary Cause = zero. Otherwise, must be 0.50 - 1.00. GRP/GRIP Crops, zero fill.
44	Secondary Cause	250	2	9(02)	Must be a valid loss cause for the Ins plan, Crop, Type, and practices reported on the Type 11 (Acreage) records. See Exhibit 21-2.
45	Simplified Claim Flag	252	1	X(01)	Must be: S = Simplified Claim R = Self-Certified Replant Claim Blank = Not Applicable See Exhibit 21-6.
46	Farm Serial Number	253	7	X(07)	Required for Peanuts and Quota Tobacco, Buy-up coverage (Coverage Flag = A) policies only. For Quota Tobacco, each FSN must have a unique unit number. For Peanuts, each optional unit number must have a unique FSN, but Basic units may include more than one FSN. Otherwise, spaces.
47	Guarantee Reduction Factor	260	3	V9(03)	Required if Guarantee Reduction Flag on the 11 record is not Blank. Enter applicable Late or Prevented Planting Guarantee Reduction Factor. For Mint types with winter coverage option, enter applicable guarantee reduction factor. Otherwise; zero fill. See Exhibit 11-1.
48	Dollar Amount of Insurance	263	10	9(08)V9(02)	For GRP (12), GRIP (73), Revenue Assurance (25), Pecans (41), IP (42 and 45), Avocados (46) and Dollar Crops (50), the selected dollar amount of protection per acre goes in this field and includes coverage level and/or price election factor (see exhibit 11-4

Field	Field Name	Begin	Size	Picture	Field Edits
No.		Pos			
					for details). For plan code (51), this field must contain the exact \$ amount from ADM-1-3. This field is based on the "CEO" coverage level if elected. Otherwise; zero fill.
49	Liability Adjustment Factor	273	7	9(01)V9(06)	Must be 1.000000. If < 1.000000, indicates that the liability submitted on the type 11 record was understated.
50	Contract Price	280	8	9(04)V9(04)	For Contract Price crops enter 100% of the contract price. Crops are: Crop State Cty Type Alfalfa Seed All All All All Canning Beans Idaho All 301, 302 Canning Beans Utah All 301 Canning Beans Oregon 045 302 Crambe All All All Dry Beans All All O62 Green Peas All All All Dry Peas All All O98 Mustard All All All Zero fill if not applicable.
51	Guarantee Reduction Flag	288	1	X(01)	L = Late Planting Required for Onions (0013) in State 36 (NY) if there is a late planting reduction and a stage percent reduction. Space = No Reduction
52 53	Filler Yield	289 296	7 10	X(07) 9(08)V9(02)	Must be Spaces. Insurance Plans 12, 40, 50, 51, and 73: zero fill. Insurance plans 41 and 46: yield must be in whole dollars and match Type 11 record for approved yield. Insurance Plans 10 and 30: yield must be greater than zero and match FCI-35 for rate class or FCI-2 agreement. Insurance plan 55: (Yield from FCI-35 * Coverage Level Factor) - minimum payment: yield must be > 0 and ADM yield * coverage level factor. Insurance plan 70: Yield must equal the FSA Farm Yield: Yield must be > 0 and fall within

April 14, 2003	Exhibit 21	FCIC-M13
	(LOSS LINE - TYPE 21)	
	Format/Edits	

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
					yield span. Insurance plans 25, 42, 44, 45, 84, 86 and 90: Yield must match Type 11 record for approved yield (crop 0067: yield is in pounds). Yield must be > 0 and fall within ADM1 R-Span rate classification. See Exhibit 11-12 for yield requirements.
54	Quota/Number of Trees	306	10	9(10)	This field is for quota lines only. Quota lbs. by line for Quota Tobacco. Determined number of Florida Fruit Trees by crop code. Number of insurable Pecan trees. Otherwise, zero fill.
55	Coverage Level	316	5	9(01)V9(04)	Must match coverage level on the 11 record. For Cat Policies, the coverage level must be 0.5000 for all crops except GRP Crops, in which case it must be 0.6500. 2003 crop year Florida Citrus - Valid Coverage Levels are {0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500, 0.8000, 0.8500} Avocados (Ins Plan 46) – Valid Coverage Levels are {0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500} Ins Plan 12 & 73 - Valid Coverage Levels are {0.7000, 0.7500, 0.8000, 0.8500, 0.9000} IP (Ins. Plan 45) - Valid Coverage Levels are {0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500} For Revenue Assurance - All T21 records for RA must have the same coverage level within the unit organization selected. IP (42), CRC (44) and All Other Crops - Valid Coverage Levels are {0.5000, 0.7000, 0.7500, 0.8000¹, 0.8500¹} There is no valid Coverage Level below 0.5000.
56	Price Election Amount	321	8	9(04)V9(04)	O.5000. Required; Must be 1.0000 for Plan codes 12, 41, 46, 50 and 73. Certified Seed Potatoes - Option CL = 1.00 Option CH = 3.00

 $^{^{1}80}$ & 85 percent coverage levels are available on APH and CRC Corn and Soybeans in selected counties in IL, IN, IA and SD and on APH and CRC Wheat in all counties in CO, ID, KS, MO, MT, NE, OR, SD, WA and WY and selected counties in ND and OK. APH and CRC Barley in all counties in MT and WY and selected counties in ND, SD, MN, ID, OR and WA.

FCIC-M13 21 - 5 RY 2002

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Format/Edits

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
					Ins. Plan 90 - Malt Barley Option A to be announced.
					Malt Barley Option B 2.00. Ins. Plan 42 - Pre Sales Price used to calculate the Loss Guarantee Malt Barley Option A = .40 or 1.25.
					Malt Barley Option B 2.00.
					All other Plans/Crops edit using ADM4. (ADM Price or Contract Price) * Price Election Factor = Price Election Amount. The 'CAT' price election is 55%. Alfalfa Seed (0107) - If Contract Price (field 50) = zeros, then use ADM Price. Suffix: 1 = Catastrophic & Established High Price
					are applicable (MPCI) 2 = Catastrophic, Established High & Market Price are applicable (MPCI) 3 = Projected Harvest and County Harvest
					Price
					(RA) are applicable 4 = Quota & Non Quota Price are applicable (Peanuts)
					5 = Support Price is applicable (Quota
					Tobacco) 6 = Catastrophic, Established High and Season Average Price are applicable (Guaranteed Production Tobacco) 7 = IP, Pre Sales Price or Harvest

57 Written Agreement 329 8 X(08)Number

of the price for the MPCI crop policy. For RSO issued Written Agreements enter the identification number for the approved written agreement for the RO, state, county and crop. For company issued written agreements, enter RO code followed by 6 digits, ONLY if

If CE Option is selected, price must be 100%

8 = CRC Base Price is applicable. 9 = Contract Price is applicable (MPCI) A = Catastrophic, Established High & Support Price are applicable

(Tobacco).

58 2 Written Agreement Type 337 X(02) the type equals TC or TS and the Written Agreement Processing Flag equals 'R'. Enter spaces if No Written Agreement exists. Valid Written Agreement types are: HR, LS,

	T	ı	Ι.		
Field	Field Name	Begin	Size	Picture	Field Edits
No.		Pos			
59	Written Agreement Processing Flag	339	2	X(02)	NB, OC, OT, PE, PT, RE, RL, SC, SG, SM, SP, TC, TD, TP, TS, UA, UC, XC and 33. Enter spaces if NO Written Agreement is in effect. Enter '33' if the insurance rate is provided on a FCI-33 (rules page, map or supplement). All entries, except a "33" require a valid Written Agreement Number in field 57. All single values must be left justified. Must be: H = ONLY for CRC High Risk land WITH a FCI-2 Agreement that changes the High Risk rate or factor. USE the High Risk Classification Premium Calculation Worksheet to calculate the premium. P = FCI-2 Dollar Amount of Insurance exception for Macadamia Trees. R = FCI-2 Agreement with a Reference County. W = FCI-2 Agreement with no Reference County Rates RC = Certified organic acreage with a location or reference county NC = Certified organic acreage with no reference county
					NT = Transitional acreage with no reference county Otherwise, spaces.
60	Valid for Escrow Flag	341	1	X(01)	See Exhibit 11-8 for edit details. Internal Use. Will be 'Y' if the record passes edits necessary for escrow processing (numeric checks). Will be 'N' if the record
61	Price Election Factor	342	5	9(01)V9(04)	is not acceptable for escrow. Must match price election factor on the 11 record (field 40). Required for all crops. Plan code 25, 44, 46 and 51 must = 1.0000. If insurance plan = "12" or "73" and coverage flag (field 13) equals "A", then this field must equal 0.6000 thru 1.0000. If coverage flag (field 13) equals "C", this field must = 0.5500.

Field	Field Name	Begin	Size	Picture	Field Edits
No.		Pos]		
			<u> </u>]	
					1.) 0.5000 this field must = 1.0000
					2.) 0.5500 this field must be 0.9100
					3.) 0.6000 this field must be 0.8400
					4.) 0.6500 this field must be 0.7700
					5.) 0.7000 this field must be 0.7200
					6.) 0.7500 this field must be 0.6700
					7.) 0.8000 this field must be 0.6300
					8.) 0.8500 this field must be 0.5900
62	M-14 Review Flag	347	2	9(02)	Must be zeros.
63	CEO Coverage Level	349	5	9(01)V9(04)	Enter CEO coverage level; must be greater than Coverage Level (field 54). Used to determine premium. Otherwise; zero fill.
64	CEO Indemnity Factor	354	6	9(01)V9(05)	(CEO Coverage Level ÷ MPCI Coverage Level) (field 63/field 55) used in indemnity calculation. Otherwise, zero fill.
65	Filler	360	191	X(191)	Must be spaces.
66	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMM Format.
67	FCIC Control Date	555	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) MMDDCCYY Format.
68	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
69	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the RO to FCIC/RMA.
70	Transaction Sequence Number	571	8	9(08)	Internal Use. The sequential number assigned to each transaction number processed by DAS after it has been sorted.
71	Transaction Rejected Flag	579	1	X(01)	Internal Use. Reserved.
72	Transaction Source Flag	580	1	X(01)	Internal Use. Reserved.
73	Filler	581	20	X(20)	Internal Use.

Notes:

The Type 21 record must contain the record number of the corresponding Type 11 record. The Type 11 record must match the Type 21 on:

Fields 2 thru 13 and field 25.

Requires an accepted 11 record.